



State of Louisiana

Statement of Organization



File
S/O
1/12
Roc #5223
#1436

2870282

FORM 200. STATEMENT OF ORGANIZATION

Committee: Louisiana Dental Political Action Committee^^^

Date filed:
01/05/2005

STATEMENT OF ORGANIZATION										
1. Name and Address of Committee Louisiana Dental Political Action Committee^^^ 7833 Office Park Blvd. Baton Rouge, Louisiana 70809 Check if new committee	2. Date of this Statement 01/05/2005 3. Estimated Membership 576 4. Amended Statement? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>									
5. All Committees Officers (including Chairperson, Treasurer, if any, and any other committee officers and directors) <table border="1"> <thead> <tr> <th>Position</th> <th>Name</th> <th>Address</th> </tr> </thead> <tbody> <tr> <td>Chairperson</td> <td>David A. Kestel DMD</td> <td>825 W. Prien Lake Rd., Lake Charles, Louisiana, 70601</td> </tr> <tr> <td>Treasurer</td> <td>Guy Ribando DDS</td> <td>2272 Barataria Blvd., Marrero, Louisiana, 70072</td> </tr> </tbody> </table>		Position	Name	Address	Chairperson	David A. Kestel DMD	825 W. Prien Lake Rd., Lake Charles, Louisiana, 70601	Treasurer	Guy Ribando DDS	2272 Barataria Blvd., Marrero, Louisiana, 70072
Position	Name	Address								
Chairperson	David A. Kestel DMD	825 W. Prien Lake Rd., Lake Charles, Louisiana, 70601								
Treasurer	Guy Ribando DDS	2272 Barataria Blvd., Marrero, Louisiana, 70072								
6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers or financially supports this committee.) Name Address Relationship to Committee										
7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions) Name Address Hibernia Bank P.O. Box 3597, Baton Rouge, Louisiana,										
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: Principal Campaign Committee <input type="checkbox"/> Subsidiary Committee <input type="checkbox"/>										
b. Name of Candidate	c. Office Sought by the Candidate									
9. Name of Person Preparing Report: Daytime Telephone:										
10. WE HEREBY CERTIFY, that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief.										
This 5th day of January, 2005.										
David A. Kestel DMD Signature of Committee Chairperson	337.478.8611 Daytime Telephone Number									

Guy Ribando DDS504.341.3120

Signature of Committee Treasurer, if any

Daytime Telephone Number

COMMITTEES WITH OVER 250 MEMBERS

WE HEREBY CERTIFY that the membership of this political committee exceeded two hundred fifty (250) members as of December 31 of the calendar year immediately preceding the date of this Statement of Organization. We further certify that at least two hundred fifty (250) members of this political committee contributed at least fifty dollars (\$50.00) to this committee during the calendar year immediately preceding the date of this Statement of Organization.

This 5th day of January, 2005.

David A. Kestel DMD

Signature of Committee Chairperson

Guy Ribando DDS

Signature of Committee Treasurer, if any



Generated Fri Jan 7 08:18:17 2005